

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CA (AMBULATORY)

Facility Information

Facility Name: OUR WAY GROUP HOME (610044)

Address: 427 NORTH 5TH STREET, TOMAHAWK, WI 54487

License Status: REGULAR

Licensed/Certified/Registered 12/30/1980

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0093377 **End Date:** 09/17/2004 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091699 **End Date:** 12/12/2003 **Type:** OTHER **Purpose:** VERIFICATION VISIT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10005276 Served 12/22/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.53(2)(a)	DOORS EXCEPT PATIO DOORS	09/17/2004	Yes
83.53(3)(d)	CLEARED PATHWAY AWAY FROM FACILITY	09/17/2004	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
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Enforcement History

Date: 12/18/2003 **SOD #**10005276 **Appealed:** No

Sanctions

OTHER SANCTION

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